



County of Los Angeles
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April 18, 2005

To: Supervisor Gloria Molina, Chair
Supervisor Yvonne B. Burke
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: David E. Janssen
Chief Administrative Officer

SACRAMENTO UPDATE

Pursuit of Position on Child Welfare Services Federal Penalty Pass-Through

On April 14, 2005, the Senate Budget and Fiscal Review Subcommittee #3 on Health and Human Services met to discuss the Governor's budget proposal to allow the State to assess counties for future Federal penalties resulting from the State's failure to meet Federal Child Welfare System performance standards. The County Welfare Directors Association, along with several County representatives, urged subcommittee members to reject the Governor's proposal, because it is yet another cost shift to counties, and because the State entered into the Federally-required Program Improvement Plan (PIP) without providing counties with additional resources to implement the plan.

A representative from the California State Association of Counties testified that this proposal would violate Proposition 1A, which prohibits the State from imposing new shares of costs on counties. Passing on penalties to counties would not only affect the State's ability to implement its own PIP, but it would also affect and penalize the same counties that are currently embarked on several efforts to meet the performance improvement goals.

Subcommittee Chair, Senator Denise Ducheny, urged the Administration to continue to work with the counties, and to report back during upcoming subcommittee hearings.

Because this proposal would impose new costs on an already under funded Child Welfare System, and reduce scarce resources that counties need to achieve

program improvements, our Sacramento advocates will oppose this budget proposal. Opposition is consistent with existing Board policy to oppose any legislation or regulation that would transfer to Los Angeles County or its residents any costs or revenue losses incurred by another jurisdiction.

Pursuit of County Position on Legislation

SB 57 (Alarcon), as introduced on January 12, 2005, would augment the Emergency Medical Services Fund by allowing counties to collect an additional \$2 penalty assessment on every \$10 penalty for all criminal offenses and moving violations. It would also allow county boards of supervisors, by resolution, to levy an additional \$2 penalty assessment for specified crimes and moving violations, including speeding, seat belt infractions, domestic violence and DUI's. Counties with pediatric trauma care units would be authorized to use these new funds to establish a Pediatric Trauma Fund to purchase pediatric facilities and equipment. SB 57 would allow five percent of the funds to be used for administration.

According to the author's staff, SB 57 would increase funding for emergency and trauma care services statewide by \$60 million to \$100 million annually. Although the author's office estimates that Los Angeles County would receive an additional \$16 million to \$20 million, the Superior Court indicates that the County's share is more likely to be about \$3.7 million.

Because SB 57 would increase funding available for emergency and trauma care services in Los Angeles County, the Department of Health Services recommends that the County support SB 57, and we concur. Consistent with current Board policy to support proposals to provide permanent, stable funding for the County's public and private emergency and trauma care system, **our Sacramento advocates will support SB 57.**

SB 57 is sponsored by the American College of Emergency Physicians and supported by the California Advocates for Nursing Home Reform, California Ambulance Association, California Nurses Association, Los Angeles Free Clinic, and Pacifica Hospital of the Valley. It is opposed by the Commission on Peace Officer Standards and Training and the California Judicial Council.

SB 57 is scheduled for hearing on April 19, 2005 in the Senate Public Safety Committee.

SB 267 (Romero), as amended on March 30, 2005, would restructure the Trauma Care Fund to require regional distribution of funds based on the statewide proportion of trauma care services provided in a region, repeal the requirement that trauma centers receive a minimum level of funding, and require the grants to be awarded on a competitive basis. Existing law requires the Emergency Medical Services Authority,

within the California Health and Human Services Agency, to administer the Trauma Care Fund and to allocate funds to local Emergency Medical Services agencies for distribution to trauma centers based on a schedule that guarantees a minimum level of funding for each trauma center.

A 2004 study funded by the National Centers for Disease Control and Prevention to evaluate the effectiveness of the Trauma Care Fund concluded that this funding was essential for maintaining those trauma centers with large numbers of uninsured patients. However, in 2003 there was no appropriation to the Trauma Care Fund in the State Budget. The Save California Trauma Centers Coalition, which includes Los Angeles County, is working to restore trauma care funding this year through the State Budget process.

The Department of Health Services (DHS) indicates that SB 267 would ensure that any future funding appropriated to this fund would be targeted to the areas of greatest need in the trauma system. Because SB 267 would maximize the effectiveness of trauma care funding, DHS recommends that the County support SB 267, and we concur. Consistent with current Board policy to support proposals to provide permanent, stable funding for the County's public and private emergency and trauma care system, **our Sacramento advocates will support SB 267.**

SB 267 is sponsored by the Save California Trauma Centers Coalition and there is no registered support or opposition. The measure is scheduled for hearing on April 27, 2005 in the Senate Health Committee.

SB 969 (Ducheny and Morrow), as amended on April 12, 2005, would exempt a driver who is 18 years of age or older from the requirement to wear a safety helmet when riding on a motorcycle, motor-driven cycle or motorized bike, if the driver has completed a motorcycle rider training program or has held a class M1 license for two years or more and has proof of current medical insurance. An M1 license allows a driver to operate any two-wheel motorcycle, motorized bicycle, or moped. The bill would also exempt a passenger who is 18 years of age or older from the requirement to wear a helmet if the passenger has proof of current medical insurance. Existing law requires any driver or passenger riding on such a vehicle to wear a safety helmet.

The Department of Health Services (DHS) indicates that the wearing of helmets has been proven to be an effective safeguard in reducing injuries and deaths related to motorcycle accidents. DHS anticipates that passage of SB 969 would increase the number of motorcycle-related injuries and fatalities. Because many of these future accident victims would likely be treated in already overburdened County emergency medical and trauma facilities, DHS recommends that the County oppose SB 969, and we concur.

Each Supervisor

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The County previously opposed a similar bill, AB 2700 (Mountjoy), on April 9, 2002, which also would have allowed a person 18 years of age or older to operate a motorcycle without a helmet if they had proof of medical insurance. Consistent with County opposition to AB 2700, **our Sacramento advocates will oppose SB 969.**

SB 969 is sponsored by the American Brotherhood Aimed Toward Education, and supported by the Modified Motorcycle Association of California. It is opposed by the California Medical Association, and the American College of Emergency Physicians (California Chapter).

SB 969 is scheduled for hearing in the Senate Transportation and Housing Committee on April 19, 2005.

Status of County-Interest Bills

County-supported AB 547 (Berg) passed the Assembly Appropriations Committee on April 13, 2005 on a vote of 13 to 5, and it now proceeds to the Assembly Floor. **AB 547** would repeal the requirement that a city or county authorize its needle exchange program through a declaration of a local emergency. It would authorize clean needle exchange programs upon the action by a county board of supervisors, and the local health officer or health commission, or upon the action of a city council, the mayor, and the local health officer.

We will continue to keep you advised.

DEJ:GK

MAL:JF:MS:RM:hg/n

c: Executive Officer, Board of Supervisors
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 Legislative Strategist
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 California Contract Cities Association
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